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BOROUGH OF GUILDFORD



ANNUAL REPORT

OF THE

Medical Officer of Health

for 1969

TOGETHER WITH

THE ANNUAL REPORT

OF THE

Chief Public Health Inspector

PERSONAL SERVICES COMMITTEE

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STAFF OF THE PUBLIC HEALTH DEPARTMENT*Medical Officer of Health:*

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Chief Public Health Inspector:

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<i>Senior Meat Inspector</i>	-	R. SUTTON, M.A.P.H.I.
<i>Food Hygiene Inspector</i>	-	F. SMITH, M.A.P.H.I.
<i>Offices and Shops Inspector</i>		B. PEPWORTH, M.A.P.H.I.
<i>District Inspectors</i>	-	J. CRAWFORD, M.A.P.H.I.
		N. J. D. PAYNE, M.A.P.H.I. (to October, 1969)
		M. P. A. SMITH, B.Sc. (Env.Health) M.A.P.H.I., (to September 1969)
<i>Pupil Public Health Inspectors</i>	-	M. P. A. SMITH (to August, 1969) D. E. PHILLIPS
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MUNICIPAL OFFICES,
GUILDFORD.

FOREWORD

TO THE MAYOR, ALDERMEN AND COUNCILLORS OF THE
BOROUGH OF GUILDFORD

MR. MAYOR, LADIES AND GENTLEMEN,

The year 1969 fortunately did not bring any outstanding or unusual Public Health problems like the floods of September, 1968, and the work of the Health Department was primarily routine, aimed as always at doing our best to safeguard and improve the health and well-being of the citizens of this ancient Borough.

There was no undue incidence of the usual mild infectious diseases of the young during the start of the year: measles in fact has shown a considerable drop in the last two years, and it would seem that measles vaccine is showing its worth. The summer will be remembered by many as exceptionally fine and beautiful, the best for 10 years probably. Just before Christmas there was an epidemic of a very unpleasant form of Asian Influenza, which caused many deaths in the elderly in Guildford and elsewhere, and some deaths in the younger age groups. This was the worst influenza many doctors and patients had experienced since 1933/34: fortunately the last really severe influenza outbreak was the Pandemic (World-Wide Epidemic) of 1918-1919, which had a disastrous mortality: with no antibiotics or chemical drugs to combat complications, deaths rose then to 150,000 in England and Wales during 1918-1919, in a population worn down by 5 years of the Great War.

In the Autumn, the Optical Information Council sent a Mobile Vision Testing Unit for 3 days in August and 3 in September: this was stationed in North Street with the Council's approval, and was visited by 668 people. Excluding inconclusive tests on 59 people, 38% were referred to their own Doctor or Optician for further examination. Such a high percentage of referrals shows the importance of the average adult having more frequent vision checks, though many of those referred would not necessarily require spectacles; particularly is this important for drivers of vehicles, especially those who drive much at night.

The introduction during the year of more stringent medical examination and testing of the driving ability of those wishing to drive Heavy Goods Vehicles or Public Service Vehicles, e.g. Fire Engines, is a step in the right direction. This is an added safeguard for other road users and pedestrians, particularly at a time when death and injury on the road is such a lamentable feature of present day life.

In October, the occurrence at Camberley of rabies in a dog imported from Germany high-lighted the importance of maintaining this Country's efforts to control this disease, fatal to animal and man once it occurs. The dog, which died, was brought through Guildford after completion of its statutory 6 months quarantine at the port of entry: 3 Guildford residents who were in contact with it received Anti-Rabies Vaccine, and were kept under prolonged surveillance. A dog belonging to one of the 3 residents was quarantined, at first at home and then in quarantine kennels. The Government then decided that the quarantine period for dogs and certain other prescribed animals should be increased from 6 to 8 months, even though this was the first case of rabies following 6 months quarantine in this Country for over 40 years.

Very considerable concern is felt every year in November by Doctors, Nurses and many others as Guy Fawkes Day approaches with its inevitable toll of dreadful burns, injuries and blindness in the young. Here is a tremendous opportunity to prevent quite unnecessary human suffering: what is needed is concerted action by Councils, organisations and individuals to persuade the Government to ban the retail sale of all fireworks. In the writer's view, fireworks should only be let off at properly organised displays under the control of experts, with the public kept at a safe distance, as is done in some other countries.

There are still too many incidents of mouldy food being sold to the public, particularly meat pies and other meat products, cakes and bread. Almost always this is due to careless control of stock, new deliveries being placed on top of older stock, instead of the other way round. The dirty milk bottle is unfortunately still not a thing of the past, and this fault will continue to occur until disposable cartons replace returnable bottles: cartons would admittedly be more expensive, but some of the cost would be absorbed by less frequent deliveries, which would be almost universally acceptable in this day and age when almost every family has a refrigerator.

Adequate and satisfactory housing for all remains the biggest need for the Community and the biggest problem for Housing Authorities: inevitably in the course of their daily work the Medical Officers and Health Inspectors are constantly meeting sad cases, difficult to help: in fact trying to deal with housing problems takes up a very large part of the time of the Health Department, but measured in terms of human happiness it is all so very worth while,

even with the inevitable frustrations. The Chief Health Inspector will be recording in due course, in his section of the Annual Report, the extension of legislation to assist in yet further improvement of existing houses, a policy vital in this day of high cost new houses.

It is encouraging to recall that the Borough Council continue to do much to help the young and the old in particular. For the young, the new Children's Playground at the corner of Nightingale Road and Stoke Road is a great joy and a credit to the Council and their Staff: for the elderly more funds for more frequent meals on wheels have been provided, and an improved Old People's Welfare Centre in the Friary Street Redevelopment Scheme is envisaged.

No Medical Officer of Health can omit mention of Smoking and Health, for here is a field of prevention of ill-health where those who wish to accept advice (unfortunately many do not wish to face the facts) can benefit themselves and their families by the simple expedient of cutting out cigarette smoking. The Chief Medical Officer of the Department of Health & Social Security, in a recent article, says "There is no other single avoidable cause of so much premature death and disability in Britain today as the smoking of cigarettes: there is no greater benefit that could be conferred on the health of the British people than the abolition of cigarette smoking." These remarks relate to death and disability due to lung cancer, bronchitis and coronary thrombosis, brought on or aggravated by cigarette smoking. The Chief Medical Officer goes on to say that the smoker who smokes 20 or more cigarettes per day from the age of 20 onwards is likely to live five years less than the non-smoker of the same age.

It may be of passing interest to comment on the names of the roads in that part of our town so delightfully called Charlotteville: it is perhaps not generally realised that most of these roads are named after famous Physicians and Surgeons, all of whom have left their mark in the fields of Medicine or Surgery. The most famous is William Harvey 1578-1657, who discovered the circulation of the blood: all the others were born in the 17th or 18th century. Jenner was the first medical man to practise vaccination against smallpox in the year 1796 (although a Dorset farmer named Jesty, a layman, had in fact used cow-pox vaccination to protect his own family before Jenner). Addison, Bright and Sydenham were Physicians and each have a disease named after them. The great Hunter brothers, William and John, Brodie, Cheselden, Cline and Cooper were all pioneers in the field of Surgery. Baillie wrote the first British Text Book of Pathology.

In conclusion, may I express my very real thanks to the Chairman and members of the Personal Services Committee for their support and interest, which is a source of great encouragement. To my colleagues in other Departments I take this opportunity of

acknowledging my indebtedness and I also thank Dr. Beynon, Mr. Reeve, Mr. Avon and all the staff of the Health Department for their loyal help and support.

I am, Mr. Mayor, Ladies and Gentlemen,

Your obedient Servant,

A. B. R. FINN,

MEDICAL OFFICER OF HEALTH.

STATISTICS AND SOCIAL CONDITIONS OF THE AREA

Area (in acres)	1969 7,322	1968 7,322
Registrar-General's estimate of the resident population mid-1969 civilian and members of the Armed Forces	55,890	55,520
Number of inhabited houses and flats as at 1st April, 1970 according to the Rate Books	18,543	18,432 (1.4.69)
Rateable Value as at 1st April, 1970	£4,470,333	£4,228,048 (1.4.69)
Sum represented by a Penny Rate for the year 1970/71	£18,500	£18,000 (1.4.69)

EXTRACTS FROM VITAL STATISTICS

	Guildford Borough	England & Wales
Live Births—		
Number	678	797,542
Rate per 1,000 population (actual)	12.1	16.3
Rate (after correction by the Registrar-General's comparability factor)	11.5	16.3
Illegitimate Live births (per cent of total live births)	9	8
Stillbirths—		
Number	7	10,662
Rate per 1,000 total live and still births	10	13
Total Live and Still births	685	808,204
Infant Deaths (deaths under one year)	10	14,397
Infant Mortality Rates—		
Total infant deaths per 1,000 total live births	15	18
Legitimate infant deaths per 1,000 legitimate live births	13	17
Illegitimate infant deaths per 1,000 illegitimate live births	32	25
Neo-Natal Mortality Rate (deaths under four weeks per 1,000 total live births)	10	12
Early Neo-Natal Mortality Rate (deaths under one week per 1,000 total live births)	7	10
Perinatal Mortality Rate (stillbirths and deaths under one week combined per 1,000 total live and still births)	18	23
Maternal Mortality (including abortion)—		
Number of deaths	—	154
Rate per 1,000 total live and still births	—	0.19
Number of Deaths	637	579,463
Death Rate per 1,000 population (actual)	11.4	11.9
Death Rate (after correction by the Registrar-General's comparability factor)	10.5	11.9
Natural increase of population during the year by excess of births over deaths	41	218,079

DEATHS

As for the past four years, deaths of the elderly (i.e. 65 years or over) accounted for three out of every four deaths in 1969, numbering 482 out of a total of 637.

Yet once again, diseases of the heart and arteries were the biggest single cause of death, totalling 308. There was an exceptionally large increase in the number of deaths from coronary artery disease of the heart, i.e. 158 (35 more than in 1968).

One or other form of cancer was the cause of death in 76 males and 69 females. Deaths from cancer of the lung caused 35 deaths, one less than last year : this disease is, as always, a matter of grave concern.

No maternal deaths occurred during the year. This maintains the excellent record, broken unfortunately by one such death in 1968, prior to which there had been no maternal deaths in the Borough for ten years, a tribute to those engaged in ante-natal and post-natal care of mothers.

Deaths from motor vehicle accidents numbered 4, a great improvement, this being 7 less than in 1968 and 13 less than in 1967, but there was a slight increase in deaths from other accidents.

INFANT MORTALITY

The number of deaths of infants under one year was 10, and 7 died within the first four weeks of birth (both figures the same as last year).

The causes of infant deaths were: —

Respiratory diseases	2
Congenital anomalies	4
Other causes	4

The Infant Mortality Rate (i.e. the number of infant deaths per 1,000 live births) for Guildford for 1969 was 15. The National Infant Mortality Rate was 18, so as is usually the case, Guildford's Infant Mortality Rate is lower than the national figure.

Guildford Deaths in 1969

Cause of Death						Males	Females	Total
B. 1.	Cholera	...	...	...	...	—	—	—
B. 2.	Typhoid Fever	...	...	...	...	—	—	—
B. 3.	Bacillary Dysentery and Amoebiasis	...	...	...	...	—	—	—
B. 4.	Enteritis and other Diarrhoeal Diseases	...	...	...	...	1	—	1
B. 5.	Tuberculosis of respiratory system	...	...	...	...	1	—	1
B. 6.	Other Tuberculosis, inc. late effects	...	...	...	...	—	—	—
B. 7.	Plague	...	...	...	...	—	—	—
B. 8.	Diphtheria	...	...	...	...	—	—	—
B. 9.	Whooping Cough	...	...	...	...	—	—	—
B.10.	Streptococcal Sore Throat and Scarlet Fever	...	...	...	...	—	—	—
B.11.	Meningococcal Infection	...	...	...	...	—	—	—
B.12.	Acute Poliomyelitis	...	...	...	...	—	—	—
B.13.	Smallpox	...	...	...	...	—	—	—
B.14.	Measles	...	...	...	...	—	—	—
B.15.	Typhus and other Rickettsioses	...	...	...	...	—	—	—
B.16.	Malaria	...	...	...	...	—	—	—
B.17.	Syphilis and its sequelae	...	...	...	...	—	—	—
B.18.	All other infective and parasitic diseases	...	...	...	...	—	1	1
B.19. (1)	Malignant Neoplasm — buccal cavity & pharynx...	...	...	...	...	1	—	1
B.19. (2)	Malignant Neoplasm — oesophagus	...	...	...	...	2	—	2
B.19. (3)	Malignant Neoplasm — stomach	...	...	...	...	6	8	14
B.19. (4)	Malignant Neoplasm — intestine	...	...	...	...	4	13	17
B.19. (5)	Malignant Neoplasm — larynx	...	...	...	...	3	—	3
B.19. (6)	Malignant Neoplasm — lung, bronchus	...	...	...	...	26	9	35
B.19. (7)	Malignant Neoplasm — breast	...	...	...	...	—	16	16
B.19. (8)	Malignant Neoplasm — uterus	...	...	...	...	—	2	2
B.19. (9)	Malignant Neoplasm — prostate	...	...	...	...	7	—	7
B.19. (10)	Leukaemia	...	...	...	...	7	2	9
B.19. (11)	Other Malignant Neoplasms, inc. Neoplasms of Lymphatic and Haematopoietic Tissue	...	...	...	...	20	19	39
B.20.	Benign Neoplasms and Neoplasms of unspecified nature	...	...	...	...	—	1	1
B.21.	Diabetes Mellitus	...	...	...	...	1	3	4
B.22.	Avitaminoses and other Nutritional Deficiency	...	...	...	...	—	—	—
B.23.	Anaemias	...	...	...	...	—	1	1
B.24.	Meningitis	...	...	...	...	1	—	1
B.25.	Active Rheumatic Fever	...	...	...	...	—	—	—
B.26.	Chronic Rheumatic Heart Disease	...	...	...	...	5	8	13
B.27.	Hypertensive Disease	...	...	...	...	3	5	8
B.28.	Ischaemic Heart Disease (=Coronary Disease)	...	...	...	...	92	66	158

Cause of Death						Males	Females	Total
B.29.	Other forms of Heart Disease	...	...	...	...	14	26	40
B.30.	Cerebrovascular Disease	...	...	...	...	28	42	70
B.31.	Influenza	...	...	...	...	4	1	5
B.32.	Pneumonia	...	...	...	...	22	21	43
B.33. (1)	Bronchitis, Emphysema	...	...	...	...	28	3	31
B.33. (2)	Asthma	...	...	...	...	—	—	—
B.34.	Peptic Ulcer	...	...	...	...	5	3	8
B.35.	Appendicitis	...	...	...	...	—	1	1
B.36.	Intestinal Obstruction and Hernia	...	...	...	...	1	1	2
B.37.	Cirrhosis of Liver	...	...	...	...	—	—	—
B.38.	Nephritis and Nephrosis	...	...	...	...	1	5	6
B.39.	Hyperplasia of Prostate	...	...	...	...	3	—	3
B.40.	Abortion	...	...	...	...	—	—	—
B.41.	Other complications of Pregnancy, Child-birth and Puerperium	...	...	...	...	—	—	—
B.42.	Congenital Anomalies	...	...	...	...	4	3	7
B.43.	Birth Injury, Difficult Labour, and other Anoxic and Hypoxic Conditions	...	...	...	...	1	2	3
B.44.	Other causes of Perinatal Mortality	...	...	...	...	—	—	—
B.45.	Symptoms and Ill-defined Conditions	...	...	...	...	5	8	13
B.46. (1)	Other Endocrine, Nutritional and Metabolic Diseases	...	...	...	...	—	—	—
B.46. (2)	Other Diseases of Blood and Blood-forming Organs	...	...	...	...	—	—	—
B.46. (3)	Mental Disorders	...	...	...	...	—	—	—
B.46. (4)	Other Diseases of Nervous System and Sense Organs	...	...	...	...	8	3	11
B.46. (5)	Other Diseases of the Circulatory System	...	...	...	...	13	6	19
B.46. (6)	Other Diseases of the Respiratory System	...	...	...	...	3	—	3
B.46. (7)	Other Diseases of the Digestive System	...	...	...	...	2	7	9
B.46. (8)	Other Diseases of the Genito-Urinary System	...	...	...	...	2	2	4
B.46. (9)	Diseases of the Skin and Subcutaneous Tissue	...	...	...	...	—	—	—
B.46. (10)	Diseases of the Musculoskeletal System and Connective Tissue	...	...	...	...	—	2	2
BE.47.	Motor Vehicle Accidents	...	...	...	...	4	—	4
BE.48.	All other Accidents	...	...	...	...	6	9	15
BE.49.	Suicide and Self-Inflicted Injuries	...	...	...	...	1	2	3
BE.50.	All other External Causes	...	...	...	...	1	—	1
Totals						336	301	637

Birth Rate, Death Rate and Analysis of Mortality in the Year 1969

	Rate per 1,000 Population.		Annual Death Rate per 1,000 Population						Rate per 1,000 Live Births.
	Live Births.	Still Births.	All Causes.	Acute Poliomyelitis.	Pneumonia.	Whooping Cough.	Diphtheria.	Influenza.	
England and Wales	16.3	0.2	11.9	0.0	0.9	0.0	0.0	0.0	18
GUILDFORD	12.1	0.1	10.5	0.0	0.8	0.0	0.0	0.1	15

Total Deaths under 1 year.

GENERAL PROVISION OF HEALTH SERVICES FOR THE BOROUGH

Laboratory Facilities

Laboratory examinations are carried out at the Guildford Public Health Laboratory, and the Laboratory sends copies of reports on infectious disease specimens to the Public Health Department. The help and co-operation of Dr. Cook, Director of the Public Health Laboratory, are acknowledged with real gratitude.

Clinics and Treatment Centres (see back cover)

Hospital Provision

The South-West Metropolitan Regional Hospital Board maintains two hospitals in Guildford:—

1. **St. Luke's Hospital, Warren Road, Guildford** provides:—

Number of beds—

General	.....	.....	.....	385
Private	.....	.....	.....	2
Coronary Intensive Care	.....	.....	.....	4

Accommodation exists for general medicine, general surgery, dermatology, obstetrics and gynaecology, paediatrics, including a special baby care unit, and radiotherapy. Full out-patient service is provided and the Coronary Intensive Care Unit is situated at St. Luke's Hospital but the Accident and Emergency Service is situated at the Royal Surrey County Hospital. A Consultant Geriatric Service has been established with a Day Hospital. The hospital is a Training School for the General Nursing Council's Register and Roll and is also a Training School for Part I Midwifery (six months if S.R.N., twelve months if S.E.N.). In addition, training is available for Laboratory Technicians, Student Radiographers and Operating Theatre Technicians.

Day Hospital

The Day Hospital at St. Luke's provides care for elderly people during the day, returning them to their homes at night, thus giving relief to their relatives and avoiding the necessity for in-patient treatment. For elderly people living alone, the Day Hospital provides good food and much-needed companionship, loneliness being considered the chief enemy of the elderly.

Facilities are at present rather restricted, but plans are in hand to extend the Day Hospital, a generous donation of £2,500 having been contributed by the W.R.V.S. towards the cost of the proposed extension.

During the year a whole time Geriatrician, Dr. Peter Milligan, was appointed, with beds at St. Luke's and at other places in S.W. Surrey. Close co-operation exists between him and the Local Authority Health Services, and this is much appreciated.

2. **The Royal Surrey County Hospital, Farnham Road, Guildford**
provides:—

Number of beds	208	
Average number occupied daily throughout the year	146	
No. of outpatients during the year	11,396	
No. of attendances made by outpatients	40,661	
No. of patients attending Accident Centre	30,844	(including 5,346 attending the Eye Department as casualties).

The Hospital carries a staff of Specialists in all branches of medicine and surgery with the exception of gynaecology, paediatrics, dermatology and general medicine.

Maternity Provision

	No. of Beds	No. of Births in 1969
St. Luke's Hospital	58 + 12 special care cots	1,048 (1322 in 1968)
Mount Alvernia Nursing Home	50	489 (463 in 1968)
Jarvis Maternity Home	13	123 (242 in 1968)
Institutional Births (Residents 636, Non-Residents 1,024)		1,660
Domiciliary Births		42
Total Births in the Borough		1,702

Notification of Births

During 1969 there were 361 male and 317 female births to residents notified, a total of 678 (731 in 1968) and 7 stillbirths.

AMBULANCE FACILITIES

The Surrey County Council Ambulance Service for the Borough operates from the County Ambulance Control, The Horse-shoes, Bolters Lane, Banstead (Telephone No. Burgh Heath 53491).

The St. John Ambulance Service, Borough of Guildford Corps, with one Ambulance Division, provides a supplementary service to that operated by the County Council, the ambulances being used for patients preferring private transport outside the National Health Service Scheme and for public duties at shows. A summary of the work carried out by the Corps is given below:—

	Members	Public Duties	Transport	Other Duties	Escorts	Hospitals
Totals	187	3,497	192	2,042½	34½	35

Total 5,801 hours

Number of cases treated on Public Duty	217
Number of cases treated off Public Duty	26

Transport

Private Cases:— 9 involving 293 miles.
 Road Accidents:— 2 involving 30 miles.
 On Public Duties:— 42 involving 1,011 miles.
 Other Mileage:— 1,034 miles.
 Number of Medical Comforts articles loaned:— 284.

District Nursing Service

This is administered by the Surrey County Council, the District Nurses employed working from the Queen's Nurses' Home, Stoughton. Details of the work carried out during 1969 are as follows:—

Midwifery

	Cases	Visits
Domiciliary Deliveries	42	

Early Discharges of Maternity Patients to District Care

From St. Luke's Hospital	130	
From Jarvis Maternity Home	34	
From Mount Alvernia	5	
From Other Hospitals	3	172
Total New Patients	214	2,893

Ante-Natal Work

Clinic Sessions (Midwives)	25
Relaxation and Mothercraft Sessions	18
Number of Attendances	135
Number of Bookings	42

General Work	1,452	
New Patients age 0-5 years	34	
	1,486	45,592

General Practice Attachments

Surgery Work

Sessions	269	2,442
		50,927

Health Visiting Service

This is also a County Council Service, Health Visitors being based at Buryfields Clinic and at Stoughton Clinic. The Health Visitors work in close co-operation with General Practitioners, the majority being attached to local practices.

Social Work Service

The Social Work Department in the South-Western Division of this County Council Service operates from Artington House, Portsmouth Road, Guildford, and deals with problems of Welfare, Families and Handicapped Persons.

Home Help Service

This is another of the County Council Services, the Home Help Department for the South-Western Division being in the Borough at Buryfields Clinic. The service caters for mothers who are incapacitated, mothers with new babies and debilitated elderly people. More Home Helps are always needed, as the demand exceeds the supply.

A Neighbourly Help Service is run in conjunction with the Home Help Service and, by this means, a neighbour can take the place of a Home Help and thus render a service which may not otherwise be available owing to the constant shortage of Home Helps.

There are in the Borough 36 Home Helps and 11 Neighbourly Helps.

Geriatric Health Visitor

Miss Lee continued her excellent service on behalf of the Surrey County Council in the geriatric field. During the year the following visits were paid by her in the Borough:—

Visits to new patients	.....	.....	.....	156 (190 in 1968)
Revisits to these and former patients and relatives	.....	.....	.....	680 (726 in 1968)

Old People's Welfare

A year of solid achievement with steady expansion has been experienced by the Guildford Old People's Welfare Council during 1969. The suspense of waiting for the decision of the Borough Council regarding the new Welfare Centre has now been relieved by the announcement that the Council has agreed to meet the cost of the new Centre, estimated at £25,000, to be sited on the river-side. It is hoped this will be completed by about the middle of 1972.

It is estimated that one in eight of the population of the Borough is an old age pensioner, and an increase on the present number of 80 visitors to housebound people is needed. This is most valuable work and there must be many more old people who might be helped by having a visitor than can be coped with at present. Extra help is urgently required. The young people have again been very active in helping with gardening, visiting, shopping, etc., particularly senior schoolgirls and boys, members of the Technical College (Task Force) and the University (S.U.S.A.G.).

The various Social Clubs have all had a further successful year, providing many social activities for their members, and all concerned with the organisation of the Clubs are to be congratulated on the success of their achievements. The new Club at Park Barn, which was opened in 1968, has greatly increased its membership.

Meals on Wheels

During 1969, the W.R.V.S. delivered 16,853 meals (14,476 in 1968) on four days each week, an increase of one day a week, an extra round being made with 6 cars and a van in use.

Mobile Library

Another service operated by the W.R.V.S., the Mobile Library, has also increased, with an extra round and an extra day. 9,555 books were loaned to 89,190 housebound people, 12 at the Old People's Welfare Day Centre and 30 at the Burpham Homes.

As a result of publicity in the local Press, more drivers and helpers have been recruited by the W.R.V.S. but still more are needed.

Family Planning Association

Family Planning Clinics are held in the Out Patients' Department at St. Luke's Hospital as follows:—

Monday and Wednesday — 6 p.m. to 7.45 p.m.

Tuesday, Wednesday and Friday—9.30 a.m. to 11.30 a.m.

(The Friday morning Clinic is **only** for the fitting of contraceptive devices).

Patients are seen only by appointment, made through the Appointments Secretary (Telephone Number Guildford 4235) or during Clinic times (Telephone Number 76208).

The services of the Family Planning Association are available for the furtherance of knowledge and the giving of practical advice on the proper spacing of families and include cervical cytology. In addition to married couples, advice is given to those about to enter matrimony.

As envisaged, a Youth Advisory Centre was opened in November 1969 for unmarried young people and sessions are held at the Family Planning Clinic in the Out Patients' Department at St. Luke's Hospital on 1st, 2nd and 5th Thursdays in each month from 5.30 p.m. to 7.30 p.m. The object of the Centre, which is very well attended, is to instill in young people a sense of responsibility.

Marriage Guidance Council

The Guildford and District Marriage Guidance Council is the local branch of the National Marriage Guidance Council, which was founded in 1938 for the purpose of providing skilled help and counselling for people experiencing difficulties and anxieties in their marriage. The Counsellors, who volunteer for the work, undergo a stringent form of selection followed by residential courses, and, in their work, receive tutorial support: they can seek, whenever advisable, the help of the professional consultants attached to the Local Council.

Having found at 40/42 Castle Street the larger premises required to provide the basic needs to cope with the increased demand for their services, the Guildford and District Marriage Guidance Council are in urgent need of funds to help to meet the much higher running costs which will be involved. The premises at 234, High Street, used for the past 10 years, have been kindly provided free of charge, but at the proposed new premises, which are in course of reconstruction, all facilities will need to be paid for, and the cost will greatly exceed the Council's current income. An appeal is being made to Institutions, professional people, businessmen and private citizens for help in meeting the £2,000 required annually to carry on the work.

This work falls into two main categories, remedial and educational. In the remedial work, private counselling interviews, for which no charge is made, are arranged through an Appointments Secretary (Tel. No. Guildford 68888) for anyone who, of their own accord, seeks help in their marriage. During 1969, 17 counsellors undertook 1,208 interviews.

So far as the educational work is concerned, trained counsellors, at the invitation of the Head Teachers, lead a series of discussion groups in schools. The number of school sessions in 1969 totalled 269, involving 1,253 children, an indication of the growth of the Council's work in schools.

The work in the educational field has recently expanded to include discussion groups in colleges and youth clubs, courses for engaged couples, meetings with student nurses, parents of school children, expectant mothers, and police cadets, and, in addition, boys and girls entering for the Duke of Edinburgh Award.

Mortuary

The Borough Mortuary is situated at Woodbridge. During 1969 the number of bodies received was 239 (246 in 1968).

Crematorium

The Guildford Crematorium, opened in January 1967, serves a wide area, including, in addition to the Borough, the countryside through Godalming, Haslemere and extending into West Sussex and Hampshire. During 1969, 1,144 cremations were carried out (1,033 in 1968).

Supervision of Nursing Homes

Mount Alvernia, Harvey Road, Guildford, the only Nursing Home in the Borough, has 78 general and 50 maternity beds, and during 1969 dealt with 1,994 general and 609 maternity patients, some of the maternity patients being delivered elsewhere. Mount Alvernia is registered with the Borough Council and is inspected under the Public Health Act, 1936: a close liaison is kept with the Home.

Infectious Diseases

Infectious cases requiring hospital treatment are normally admitted to Ottershaw Isolation Hospital, though some go to Green Lane Hospital, Farnham, and occasionally elsewhere.

Notifiable Diseases (other than Tuberculosis) During the Year 1969

	Total cases notified	Cases admitted to Hospital
Measles	126	—
Whooping Cough	1	—
Scarlet Fever	5	—
Dysentery	6	—
Food Poisoning	4	—
Infective Jaundice	2	—
Acute Meningitis	1	1
Acute Encephalitis	1	1
	<hr/> 146 <hr/>	<hr/> 2 <hr/>

Immunisation and Vaccination

Poliomyelitis Vaccination

Oral vaccine is given in conjunction with triple vaccine (diphtheria, whooping cough and tetanus), the first dose at six months, the second at eight months and the third at one year of age.

Diphtheria, Whooping Cough and Tetanus Immunisation

Triple vaccine is given with oral poliomyelitis vaccine at the above-mentioned intervals. By this means, it is no longer necessary to give boosting doses of triple vaccine at eighteen months of age.

Subsequent boosting doses of oral poliomyelitis vaccine and diphtheria and tetanus vaccines are given at five and fifteen years of age: the latter is designed to give the school leaver an optimum degree of immunisation.

Measles Vaccination

This is given as a routine at thirteen months of age: at present no boosting doses are given.

Smallpox Vaccination

The value of smallpox vaccination and strict control of contacts and cases is shown by the fact that the incidence of smallpox throughout the world as a whole has dropped by almost 60% in the first three years of the World Health Organisation's world-wide eradication campaign.

From 128,000 reported cases in 1967, the number dropped to 56,000 in 1969, and the number of countries reporting cases of smallpox went down from 43 to 29: the greatest reduction was in Africa.

The rapidity with which travellers from smallpox-infected areas abroad can travel by air to this country, and the increasing extent to which people from the British Isles travel abroad, remain cogent reasons for encouraging vaccination in infancy (at 14 months) followed by re-vaccination at five years and fifteen years.

It remains vitally important to have infants immunised against diphtheria, tetanus, whooping cough, poliomyelitis, measles and smallpox, and school entrants against all these, except whooping cough and measles.

B.C.G. Vaccination

This vaccination against tuberculosis is available through the County School Health Service to school children of 13 years and upwards and also to students attending Universities, Teacher Training Colleges and other establishments of Further Education.

Tuberculosis

There were 323 cases on the Tuberculosis Register at the beginning of 1969 and 286 at the end of the year: 13 newly notified cases of pulmonary tuberculosis (the same number as in 1968) and 2 cases of non-pulmonary tuberculosis (5 in 1968) were added to the register during 1969. There was one death from pulmonary tuberculosis, but no deaths from non-pulmonary tuberculosis.

The age groups of new cases in 1969 are given in the following table: —

Age Periods	Pulmonary		Non-pulmonary	
	M.	F.	M.	F.
Under 1	—	—	—	—
1—	—	—	—	—
2—4	—	—	—	—
5—9	—	—	—	—
10—14	—	—	—	—
15—19	—	—	—	—
20—24	—	—	1	—
25—34	1	3	—	—
35—44	1	1	1	—
45—54	—	—	—	—
55—64	1	5	—	—
65—74	1	—	—	—
75 and over	—	—	—	—
	4	9	2	—

New Cases and Mortality 1960-1969

	New Cases	Deaths
1960	17	6
1961	24	3
1962	11	2
1963	14	1
1964	20	1
1965	10	1
1966	11	—
1967	15	2
1968	18	2
1969	15	1

The Guildford Borough Section of the Guildford Borough, Godalming and Haslemere Care Committee for Tuberculosis and Chest Diseases held two meetings during 1969 and assistance was given to families living in the Guildford Borough area in various ways.

Help was given in the form of weekly grants to enable patients to buy extra food, and in orders for milk. Several families were helped with fares to visit relatives while in hospital, as this is always a considerable expense to them. A number of patients were given supplies of fuel.

The Christmas Seal Sale was organised as in previous years and £76 was raised in the area. Christmas gifts of 30/- each were given to cases recommended for these.

Mass Radiography Service

At the end of 1969, the Department of Health and Social Security, having reviewed the present effectiveness of the Mass Miniature Radiography Service, suggested that the general need for this service no longer existed, and the Secretary of State's Standing Medical Advisory Committee recommended that the number of Mass Miniature Radiography Units should be reduced and that Units should not be used specifically for cancer surveys.

It was, therefore, proposed to phase out the Mass Radiography Units and the Medical Director of the Surrey Mass Radiography Service was instructed by the Regional Hospital Board that as from 1st April 1970 one Unit only would operate in Surrey, carrying out the weekly programme of X-Rays primarily intended for use by General Practitioners. Consequently, it would not be possible for special facilities to be provided for schools, office workers, or factory groups, or for open sessions for the general public to be held, and it seemed that there would be no option but to accept the eventual run-down of the service other than for special surveys following incidents of tuberculosis in schools, factories, etc.

Your Medical Officer of Health accepts that the service is finding fewer cases of pulmonary tuberculosis, but it is finding more cases of lung cancer, which in itself would appear to be sufficient justification for the continuance of the Mass Radiography Units, even though the returns are small in terms of the number of cases of these two diseases detected. While unable to support the total retention of the Units on statistical grounds, he deplores the Board's decision on every other ground.

The Borough of Guildford is fortunate in that the Chest Physician at the Guildford Chest Clinic already gives an extremely good service, both to General Practitioners and the Borough Council. It would, however, undoubtedly be more difficult to persuade

the public to seek routine chest X-Rays voluntarily if they had to go out of the centre of the town to either the Guildford Chest Clinic or to one of the two Hospitals, and this would be more time consuming and more inconvenient, as well as involving possible expense. The site in North Street which the Mass Radiography Unit has visited weekly on Thursday mornings since November 1965 has been extremely convenient for those working in, and those visiting, the town.

In view of the controversy aroused by the proposed phasing out of the Mass Radiography Units, the matter has been further considered and the Regional Hospital Board has issued a statement to the effect that as the integration of the Mass Radiography Service into the Hospital Radiological Departments could not be achieved in this Region for many years, the Board is not in a position to offer an alternative for the time being. The existing arrangements for General Practitioner sessions, which follows a weekly schedule and which members of the public not referred by their doctors are also allowed to attend, will continue, although at times of heavy demand priority will be given to patients referred by family doctors. Specially advertised sessions will be discontinued, as also will visits to factories, but in the case of the latter, such visits will be carried out if deemed necessary, for example, at the request of the Medical Officer of Health. The Regional Hospital Board proposes to review the position in twelve months' time.

During 1969 the Mass Radiography Unit carried out a total of 4,008 chest X-Rays in the Borough, the findings being as follows:—

	Number X-Rayed	Cases of Significant Pulmon- ary Tuberculosis			Cases of Primary Lung Cancer		
		Males	Females	Total	Males	Females	Total
General Practitioner Chest X-Ray Service	366	0	1	1	0	0	0
Attendances by General Public, Factory Groups, etc.	3,642	0	0	0	2	0	2

Health Education

With the approval of the Borough Council, the County Health and Welfare Committee arranged for the Health Education Council's Mobile Exhibition Unit to visit Guildford for 4 days in September (3 days in North Street and 1 in Tunsgate).

Guildford was chosen to be the first town in the country to receive a visit from this new Unit, equipped with closed-circuit television and audio-visual recording unit. The subject chosen was Cancer Education, and the Unit was staffed jointly by medical and nursing staff from the Health Education Council and the Divisional Health Department.

250 members of the public visited the Unit, asked questions, examined the displays and received advice.

The Mayor, as Chairman of the Personal Services Committee, honoured the Unit with a visit, and together with the Deputy Medical Officer of Health welcomed the Unit and its staff, and discussed Cancer Prevention. An excellent Audio-Visual recording was made of the Ceremony, and of patients who had been cured of cancer.

When cancer is discovered early, the results of treatment are very much improved. The purpose of this educational campaign was to produce a better understanding, to get rid of inaccurate beliefs, and to bring patients for treatment at an early stage.

It is vital that anyone who finds a lump in their body, or has sores which do not heal, or any unusual bleeding, should always seek medical advice promptly in order that cancer, should it be present, can receive appropriate treatment.

“The Medical Officer”

Every Medical Officer of Health regards “The Medical Officer”, a weekly Journal for Medical Men and Women in the Community Health Services, as his or her professional journal. It contains invaluable articles, information and advice, all of which is of the greatest help. From time to time extracts from the Annual Reports of Medical Officers of Health appear in “The Medical Officer” when they are of general interest. As the Editor of “The Medical Officer” is a Guildford Citizen and edits the Journal in Guildford, your Medical Officer of Health would like to take this opportunity of expressing his appreciation of the Journal to the Editor.

Annual Report
of the
Chief Public Health Inspector
for 1969

HEALTH EDUCATION

1970 is European Conservation Year and newspapers, television, politicians and learned public speakers have leapt onto the bandwagon to expound the virtues of cleaning up not only Great Britain but the rest of the world as well. Public Health Inspectors and Engineers welcome this unexpected and somewhat belated interest in a gospel they have been preaching for years. The public generally seems to accept with surprising equanimity quite intolerable conditions, and it probably needed a national effort to jog them out of their lethargy. Nobody under the age of 25 knows what it is to live without the constant roar and stink of traffic in our towns and overhead in our skies. In our industrial areas nobody of any age knows what it means to breathe clean air. True, smoke control areas have contributed immensely to the cleanliness of the air in some towns, but this only serves to show what can be achieved when the effort is made.

Few people need convincing that our modern neuroses are due largely to the life we lead and the mental and physical strain which environmental pollution of all types imposes on us.

Scientists tell us that if we continue to pollute our world at the present pace our planet will shortly not support life. Our rivers and lakes are open sewers and cesspools, but few people seem to care. The cost of cleaning up the mess we have made during the last two centuries in this country will be high, but it is technically possible. It will not exceed the cost of the pills and potions we pour down our throats to cure the physical and mental disorders directly attributable to it.

Pollution is directly proportional to population, and the density of our population is increasing dramatically. There are immediate steps which can and must be taken to arrest increasing pollution, so that even if we do not entirely cure the problem for the extra millions in our own islands by the end of this century, at least we can reduce pollution to a supportable level.

First, we need an immediate fuel policy aimed at phasing out the consumption of fossil fuels other than sulphur-free oils, gas and certain clean solid fuels.

Second, we need immediate effective legislation to control exhaust emissions from road vehicles.

Third, we need effective legislation to control vehicle and aircraft noise.

Fourth, we need capital expenditure and research on sewage disposal and a complete ban on the discharge of untreated factory and farm effluents to streams and rivers.

Fifth, we need to phase out the use of many chemical fertilisers and herbicides, a high proportion of which are carried into rivers and streams.

Sixth, and perhaps most important, we need to keep our local and central Government representatives constantly aware of the dangers of neglect. It is not enough to have one conservation year, we need a conservation decade.

Guildford may be regarded as fortunate; but have we any problems and programmes, if so what are they?

A scheme for the initiation of smoke control was supported by the Personal Services Committee, but Government support has so far been lacking. In fact so chaotic has the solid smokeless fuel situation become that many towns which initiated smoke control schemes have been obliged to postpone further progress. This in the end will probably hasten the shift away from solid fuel to gas and electricity which in the final analysis is highly desirable.

The Council has plans to replace the obsolete refuse destructor works, a modern incinerator will eliminate the present dust and smoke pollution. As a palliative work has been carried out to improve combustion at the existing plant. Plans are coming to fruition to improve the sewage works, a comforting thought for those downstream who abstract water for domestic use. The elimination of noise and muck from vehicles in the town centre may follow present traffic management schemes, but these schemes may only shift the problem elsewhere and nearer residential areas. As this report is being prepared news has been released of proposals to permit on our highways 44 ton juggernauts with prospects of 60 tonners still to come. The imagination boggles at the prospect of the noise, pollution and nerve-racking experience these will inevitably produce. Visualise if you can one of these monsters struggling through Guildford High Street or rumbling through Burpham in the small hours of the morning.

This proposal is symptomatic of a nation more concerned with commerce than with the quality of the life we lead.

To increase awareness about the problems associated with environmental pollution a number of lectures were given by members of the staff during the year. In addition exhibitions were held at the County Show, Sandfield School and, through the generosity of a Building Society, details of the Improvement Grant Scheme were shown in their window. A new booklet for Food Handlers has been produced giving brief notes on the causes and prevention of food poisoning. A booklet on the same lines will be produced for the housewife in 1970. A series of lectures was given at the Brew House in the Spring.

A number of talks and lectures have been given to the senior forms in schools, particularly those taking examinations in subjects closely allied to the interests of the Department.

There is never enough time to do as much of this educational work as one would like to. This year we suffered the added mis-

fortune of being without Mr. Smith, the Food Hygiene Inspector, for the greater part of the year through sickness.

HOUSING

Man's first essential has always been shelter. We are still, in the middle of the 20th century, struggling as we have been during the last 200 years to provide satisfactory shelter for each family in our expanding population. Guildford is no exception, although we have not the slums still so common in England's industrial cities where there are still too many families living in unsatisfactory homes. As will be seen from the tables at the end of this section, clearance and improvement continued steadily during 1969.

In August a new Housing Act came into operation. This increased grants for the improvement of our older houses, and a new emphasis has been given to saving obsolete houses rather than letting them deteriorate slowly until they become suitable only for clearance action. There are now three types of grants: Discretionary Grants for improvements to a high standard including help towards the cost of repairs needed to make modernisation thoroughly effective; Standard Grants for the provision of bathrooms, indoor w.c.'s and hot water systems in existing dwellings which lack them but which are otherwise reasonably satisfactory; and a new kind of Special Grant for the provision of basic amenities in houses in multiple occupation. Discretionary Grants may also be paid for the conversion of large houses into self-contained flats. Instead of the old maximum of £400, the Discretionary Grant has been increased to £1,000 (or £1,200 where buildings of three or more storeys are being converted). Of this £1,000 up to a half can be spent on repairs. The Standard Grant has been increased from £155 to £200, and the provision which required the installation of a larder has been dropped, apparently on the unfounded assumption that everybody now has a refrigerator. The £200 grant can be increased to £450 where a bathroom cannot be provided within the house and it is necessary to build on or convert outbuildings. In no case may the grant exceed one half of the cost of approved work. The day-to-day working of the new scheme is left almost entirely to the discretion of Local Authorities, and there is little direction from Whitehall. The grants are an outright gift, not repayable, and with none of the conditions attached to them which made some of the earlier grant schemes so unpopular. The work must be carried out and completed satisfactorily and the house must have the necessary life expectancy. Before any work is carried out, of course, the tenant's agreement must be obtained, and where a house was formerly let at a controlled rent it becomes automatically converted to a regulated tenancy, and a new and fair rent is fixed.

The main purpose of the Housing Act, 1969 is to encourage the improvement and repair of our older houses. Financial inducement is therefore given not only through the grant scheme itself but also through the provisions for fixing fair rents. If a dwelling is improved to the new standard the tenancy can be converted from a controlled tenancy to a regulated tenancy. A dwelling which already has all the standard amenities and is in good repair can also be converted from a controlled to a regulated tenancy. To secure de-control the landlord must apply to the Council for a Qualification Certificate. An inspection is carried out to ensure that the house has the standard amenities and is in a satisfactory state of repair. To safeguard the tenant he must be notified of the receipt by the Council of the application and finally of the Council's intention to issue a Certificate. If the dwelling does not meet the statutory standard the application can be refused. In order to cut red tape, in Guildford the owner is usually notified of any deficiencies immediately the application is received. This enables him to carry out any work considered necessary within the statutory 28 day period so that there need be no delay in issuing the Qualification Certificate. The tenant benefits by having his house put into a satisfactory state of repair and by the provision of any standard amenities which are lacking. Where the owner wishes to take advantage of the grant scheme to provide modern amenities which are lacking, a combined application for an Improvement Grant and Qualification Certificate can be made.

Certainly the Housing Act, 1969 has brought a great deal of work to the Department at a time of staff shortage but it is, nevertheless, welcomed as a genuine attempt to assist Councils and owners to improve the existing stock of houses, a matter of primary interest to Public Health Inspectors, much of whose time is spent in dealing with housing repair and improvement. In order to ensure that houses are not allowed to continue to deteriorate, power has been given in the new Act to enable Councils to require good maintenance. Formerly Councils could step in only when houses had become so bad that they were in some respects unfit for habitation because of disrepair and dilapidation. Now where it seems evident that a house is deteriorating through neglect, the Council can require the owner to carry out essential maintenance work.

One of the most satisfactory aspects of Improvement Grant work in Guildford is the high proportion of tenanted houses which are improved; as will be seen from the tables the proportion is about double the national average (which is about 22%). This, in my view, indicates the importance of having improvement grant work carried out by Public Health Inspectors who, during their normal duties, spend much time in peoples' homes and are able to advise and persuade landlords and tenants to accept improvements. Not unnaturally applications for grants in the first half of 1969

were not up to the usual numbers. Indeed, owners were advised where possible to wait until the new Act came into operation so that they could take advantage of higher grants.

In anticipation of Part II of the Housing Act, 1969 which enables Councils to make General Improvement Areas, the area bounded by Stoke Road, York Road, Church Road, Woodbridge Road and the railway was surveyed extensively. It was hoped that it would be possible to make an Improvement Area to cover this part of Guildford which contains several hundred older houses, many of which are obsolete and suitable for rehabilitation. The Act enables improvement to be carried out to the environment as well, and the Borough Engineer prepared plans indicating what could be done to make this a more pleasant area for people to live in. Several public meetings and exhibitions were also held. Unfortunately, highway proposals have prevented an early start on the scheme, but nevertheless interest in house improvement has been stimulated and a number of houses have been modernised and repaired to a high standard with the aid of the new grants. House-to-house inspections will be continued within this area in an effort to maintain the momentum. An exhibition has been arranged in the area to show what can be done with grant aid in a house which was purchased and modernised by the Council.

With the help of this new Act I am confident that rapid strides will now be made to solve once and for all the problem of obsolete houses in Guildford.

Council Houses. By the 31st December, 1969 the Council had provided 4,922 dwellings, of which 3,461 are post-war houses. During 1969, 24 units of accommodation, all of which were for renting, were handed over by the builders.

At the 31st December, 1969, the waiting list of applicants comprised:—

(1) Families entitled to consideration for rehousing	.....	565
Single adults	.....	141
(2) On an Abeyance List (where waiting periods are being served) families to be eventually transferred to the previous list when various qualifications have been completed	.....	16
Single adults over 50 years	.....	1

Clearance Programme

During 1969 the following action was taken with regard to unfit houses included in the 1966/70 Clearance Programme:

	No. of Houses	Families Displaced	Houses Demolished	Houses made fit
Clearance Areas and Compulsory Purchase Orders:—		*		
Houses included in Clearance Areas represented before 1969	—	10 (12)**	11	—
Houses included in Compulsory Purchase Orders but outside Clearance Area represented before 1969	—	1 (1)	1	—
No Clearance Areas were dec- lared during the year				
Individual Unfit Houses:—				
Closing Orders:				
(a) Buildings	4	2 (3)	—	2
(b) Parts of Buildings	—	2 (4)	—	—
Demolition Orders	2	14 (21)	6	—
Undertakings	2	—	—	1
Local Authority Property	12	8 (19)	11	—
	20	37 (60)	29	3

*=including tenants died or found own accommodation.

**=figures in parentheses show numbers of persons.

The following table shows the total number of houses included in Clearance Programmes I, II and III which have been dealt with up to the end of December, 1969:—

	Privately owned	Council owned or controlled
Number of Houses in Clearance Areas only:—		
Confirmed	70	—
Awaiting confirmation	—	—
Number of Unfit Houses included in Clearance Areas/Compulsory Purchase Orders:—		
Confirmed	199	10
Awaiting confirmation	—	—
Number of Individual Unfit Houses dealt with by Closing Orders or Demolition Orders	162	—
Number of Houses dealt with by Certificates of Unfitness	—	114
Number of Individual Unfit Houses where Under- takings have been accepted	35	4
Number of temporary huts demolished	—	201
Number of houses demolished or closed by arrangement with owners	11	—
	477	329

Improvement Grants

During the year 64 formal applications for Improvement Grants were received. The following table shows the position with regard to grants during 1969: —

	Standard Grants	Discretionary Grants
Formal applications received:		
(a) owner-occupied	23	12
(b) tenanted	28	1
Formal applications approved:		
(a) owner-occupied	23	12
(b) tenanted	28	1
Formal applications refused:		
(a) owner-occupied	—	—
(b) tenanted	—	—
Improvements not proceeding	—	—
Number of dwellings improved and grants paid	44	16
Total amount paid in grants	£9,636-0-10	£5,871-3-0
Average grant per house	£219-0-0	£366-18-11
Amenities provided with standard grants:		
(a) fixed bath	40	
(b) shower	—	
(c) wash-hand basin	43	
(d) hot water supply (to any fitting)	44	
(e) water closet (i) within building	39	
(ii) accessible from dwelling	—	
(f) foodstore	36	

Rent Act, 1957

No applications were received for a certificate of disrepair during the year.

CLEAN AIR

The fallacy of continuing to rely on Solid Smokeless Fuel to solve our air pollution problems in Smoke Control Areas has at last been shattered. The abandonment of coal for use in gas production has led to a rapid decrease in coke supplies at a time of increasing demand. The National Coal Board has, so far, failed to honour its promise to produce a satisfactory smokeless fuel in quantity as an alternative to coke. Although very welcome, the expansion in the production of proprietary brands of smokeless fuel has done little to fill the gap.

It should, therefore, by now be obvious that the existing move away from solid fuel must be hastened and encouraged. There must be a definite national fuel policy. Natural gas, liquid fuel and electricity are there in abundance. They are matched to 20th century living, e.g. working couples do not want the trouble of lighting solid fuel appliances at the end of a hard day. The touch of a switch can solve our domestic smoke problems in the next decade if the right lead comes from the Government of the day.

Guildford Borough Council has given an example to all local developers. No recent Council housing estates have open fires. All rely on modern and smokeless central heating either by gas or electricity. Most of the private housing developed in recent years has followed this lead. The Health Department carries out a continuing publicity campaign to encourage householders who still use bituminous fuel to change to smokeless fuel. This campaign has enjoyed some success. Figures for coal sales in the town have fallen rapidly over the last few years. In spite of this there is still too much domestic smoke. A recent newcomer to Guildford who had moved here from a Northern industrial town complained bitterly that the air in Guildford was noticeably dirtier than at his previous home, yet the town he moved from, Salford, is considered by many to be one of the more backward towns so far as smoke control is concerned. Clean air does not depend solely upon the absence of domestic smoke. Fortunately our large industrial and commercial installations locally cause little difficulty. Since the modernisation of the two hospital incinerators, conditions have greatly improved. There are still one or two boiler plants which continue to give trouble periodically but not, so far, to the extent to justify statutory proceedings. The other source of air pollution which causes a good deal of irritation is from road traffic. This is not a problem which can be solved locally and awaits National legislation which will exercise some control over the way in which motors are constructed.

The following table indicates the trend in smoke and sulphur dioxide recorded at the Municipal Offices in Guildford:—

Average Results for 1964 to 1968

	Smoke					Sulphur Dioxide				
	1964	1965	1966	1967	1968	1964	1965	1966	1967	1968
January	170	59	96	68	65	162	85	108	128	150
February	131	107	37	53	58	102	118	65	88	130
March	84	62	—	21	37	62	94	—	60	103
April	30	23	30	27	27	34	76	64	73	89
May	22	17	6	18	15	18	47	44	38	59
June	16	16	—	10	—	21	41	48	31	—
July	20	12	9	—	13	29	27	27	—	27
August	21	16	13	14	11	32	26	27	27	23
September	24	—	63	21	14	32	—	72	41	32
October	120	67	140	19	—	87	93	58	26	—
November	80	73	73	86	55	117	130	100	100	73
December	150	66	37	N	N	102	85	86	N	N

All concentrations expressed as microgrammes/cubic metre

—Monthly summary not received.

N Insufficient number of readings to give average (Christmas close down).

MEAT INSPECTION

The Council continued to provide slaughtering facilities throughout the year at Guildford Slaughterhouse despite the constant possibility that the Council would relinquish control and lease the premises to a private operator. Animals continued to be dressed for owners by the Slaughtering Contractor.

This uncertainty has, no doubt, been one of the contributory factors in the decline in the year's throughput, although again economic considerations together with the effects of the 1967/68 Foot-and-Mouth Disease outbreak must also be taken into account, and the drop of 79% in the numbers of sheep slaughtered must be attributed mainly to national rather than local factors.

The drop in the numbers of beef cattle slaughtered has been offset to some extent by the increase in the numbers of cows, which can be partially accounted for by the introduction of the Meat (Sterilization) Regulations, 1969, requiring the sterilization of knacker meat before sale as animal food, and the demand from dog owners for fresh meat for their pets, which must now be of the standard required for human consumption.

All meat slaughtered was inspected by the Senior Meat Inspector, with assistance as required by other Public Health Inspectors, and this involved the Department in 117 hours overtime during the year to cope with late working, and occasional weekends.

Owing to the radical decrease in the year's throughput, the charges levied for the Meat Inspection Service have dropped by £747 11s. 9d. to a total of £1,294 16s. 6d., and for the first time since they were instigated in 1963 have placed a burden for this service on the rates of the Borough.

The following table shows the numbers of animals slaughtered and condemnations made during the year:—

	Cattle ex. Cows	Cows	Calves	Sheep and Lambs	Pigs	Total
Number killed and inspected	4,488	1,871	392	7,530	18,638	32,91
All Diseases except Tuberculosis						
Whole carcasses	3	19	9	13	66	110
Carcases of which some part or organ was condemned	2,434	1,168	4	1,097	5,300	10,003
Percentage of number in- spected affected with dis- ease other than tuberculo- sis or <i>Cysticercus bovis</i> ...	54.30	63.39	3.32	14.74	28.79	30.73
Tuberculosis						
Whole carcasses	—	—	—	—	—	—
Carcases of which some part or organ was condemned	2	2	—	—	29	36
Percentage of number in- spected affected with tuberculosis	0.046	0.26	—	—	0.16	0.19

Cysticercus bovis

Carcases of which some part or organ was condemned	40	—	—	—	—	40
Carcases treated	2	—	—	—	—	2
Generalised and totally con- demned	—	—	—	—	—	—

Diseases other than Tuberculosis

The variety of diseases encountered during meat inspection showed little significant change during the year with Liver Fluke still predominant in cattle and sheep, together with other mainly localised conditions. In pigs pneumonia and parasitic infestation of the liver are the main causes of condemnation, but the continued tendency amongst pigs to indulge in tail biting, resulting in multiple abscesses throughout the carcass and often pyaemia still gives rise to some concern.

Tuberculosis

The incidence of this disease was again little changed, and all lesions found were of a localised nature. In cattle the lesions were confined to the lungs, and in pigs the heads.

Brucellosis

The voluntary eradication of this disease under the supervision of the Ministry of Agriculture's Veterinary Officers continued during the year. Animals found to be affected after testing are consigned to the Slaughterhouse where carcasses are inspected prior to release for human consumption.

Cysticercus Bovis

In only two cases were multiple or viable cysts discovered during meat inspection, and the carcasses consigned for treatment in the Cold Stores. The remaining cysts discovered were single degenerated ones, often unidentifiable, necessitating only the condemnation of the affected organs.

Laboratory Facilities

Facilities for the examination of specimens continue to be available at both the Public Health Laboratory and Weybridge Veterinary Laboratory, and during the year two specimens were sent for examination, both of which proved to be negative.

Hygiene

Although the new Cutting Room was completed during the year this has not yet been used due to the uncertain future of the Slaughterhouse, and the cutting of meat is still carried out on the loading bay.

The new lairage has also been completed and although generally because of the decrease in throughput has not been full used proved to be of immense value over the Christmas period with the consequent increase in the numbers of animals awaiting slaughter.

The uncertainty of the future of the slaughterhouse, together with its possible effect on the jobs of personnel employed there has affected not only the programme of alterations and repairs, but the morale of the staff with the result that an acceptable standard has proved difficult to maintain.

It is hoped that the future of the slaughterhouse will be determined at an early date during the forthcoming year so that a more stable environment can be provided in which to develop a high standard of production.

Poultry Inspection

There are no poultry processing premises within the district.

DISEASES OF ANIMALS

The new Cattle Market at Slyfield Green came into operation in September, 1969. In September the Council agreed to appoint a Technical Assistant in the Health Department and his duties include the issue of movement licences at the new market. This has greatly helped the smooth administration of the work. There were many teething problems when the market opened relating to cleansing, disinfection, the auctioning of calves, etc. and it seemed that perhaps insufficient thought was given to the design of the market. However, few new projects are initiated without some difficulties, and over the course of a few months it is hoped that the Auctioneers will learn to cope with the problems of running an extensive market.

Animal Welfare

There are two animal boarding establishments and two licensed pet shops in the Borough.

PEST CONTROL

New varieties of less toxic pesticides are now being marketed and some of the more persistent types formerly readily available can no longer be freely purchased. This has created no problem for the Public Health Department because approved users can still obtain the more persistent types of insecticides where their use is justified. On the other hand, one particular type amongst the newer varieties which has come on the market as a replacement has proved particularly effective in the treatment of cockroaches,

and some infestations which had persisted in old buildings for many years have been virtually eradicated.

	Number of visits
Flies	20
Lice	1
Fleas	31
Wasps	305
Ants	114
Beetles	250
Psocids	1
Bugs	1
Silverfish	8
Mosquitoes	17
Caterpillars	1
Woodlice	2

Rats and Mice Destruction

Properties other than sewers:				Non-Agricultura	Agricultura
1.	No. of properties in district	...	...	21,532	36
2.	(a) Total number of properties (including nearby premises) inspected following notification	...	...	688	—
	(b) Number infested by (i) rats	...	...	563	—
	(ii) mice	...	...	85	—
3.	(a) Total number of properties inspected for rats and/or mice for reasons other than notification	...	...	2,256	46
	(b) Number infested by (i) rats	...	...	1,157	37
	(ii) mice	...	...	1,087	9

Summary of Visits to Premises by Pests Officers

	Agri-cultural	Local Authority	Dwelling Houses	Business Premises	Total
First visits	—	17	627	6	650
Subsequent visits	52	175	792	1,276	2,295

During the year 97 contracts for treatment of rats and mice in business premises were entered into, and five premises were treated on a fixed price basis.

There is no evidence of infestation by Warfarin-resistant rats in Guildford, and Warfarin continues to be the main weapon in the control armoury.

ENVIRONMENTAL HEALTH INSPECTIONS

For most of 1969 the Department was seriously understaffed, and because of this the amount of work done has fallen considerably. Mr. F. Smith, the Food Hygiene Inspector, was away from May until the end of the year because of illness, and Mr. Payne, a District Inspector, left during October. Mr. M. Smith who took his Degree in July left in September. The depleted staff worked under great difficulties, tackling with enthusiasm the new Housing Act, but inevitably other work suffered, and in particular the work

on food hygiene was cut by about 50%. It is possible to tolerate a situation like this for perhaps six months, but unless food premises are visited regularly and vigorous action taken where necessary, standards unfortunately inevitably fall. By the end of 1969 this was becoming painfully obvious.

The Council agreed to a re-organisation within the Department and an Authorised Meat Inspector was appointed at the Slaughterhouse. This enabled Mr. R. Sutton, the Senior Meat Inspector, to be appointed to the joint post of Senior Meat and Food Inspector. This appointment and the appointment of the Technical Assistant has helped us over a most difficult period, and when the vacancy for a District Inspector has been filled work in the Eastern district of the town which has been at a standstill can be resumed. The reorganisation resulted in effect in decreasing the establishment for Public Health Inspectors. This can only be justified by appointing the assistants who have been able to take on some of the repetitive work and re-inspections, thus releasing the Public Health Inspectors for initial visits and other work where their special skills are not wasted.

Fortunately during 1969 there were no particular crises to compare with the 1968 flooding and the 1967 Foot-and-Mouth Disease outbreak.

The following table gives details of inspections made. The figures in brackets are those for 1968. This table is followed by details of notices served:—

Number and Nature of Inspections Made

	No. of visits								
Housing Acts									
First Inspections	357	(161)							
Re-inspections	159	(396)							
Overcrowding	10	(12)							
Improvement Grants	516	(731)							
Council Property (Repairs only)	76	(85)							
Multiple Occupations	45	(53)							
Land Charges	218	(250)							
Qualification Certificates	17	(—)							
Public Health Acts									
Nuisances investigated and revisited	647	(679)							
Infectious Diseases	104	(124)							
Insects	19	(29)							
Drainage Work	230	(250)							
Caravans	14	(91)							
Fairs, Shows, Sports Grounds	13	(35)							
Pollution of Watercourses	1	(9)							
School and Public Swimming Baths	22	(43)							
Hairdressers	10	(37)							
Factories Acts									
Factories	44	(73)							
Outworkers	0	(12)							

Offices, Shops and Railway Premises Act

First Inspections	133	(186)
Re-inspections	165	(170)
Accidents investigated	8	(19)

Food Control

Slaughterhouse	60	(50)
Butchers	81	(90)
Catering Premises	242	(287)
Bakers and Confectioners	54	(87)
Fish Shops – wet and fried	29	(67)
Ice-cream shops	37	(46)
Dairies and Milk Shops	47	(51)
Greengrocers	50	(69)
School Kitchens	7	(18)
Canteens	25	(41)
Grocers and General Stores	184	(235)
Licensed Premises	66	(122)
Mobile Shops	24	(40)
Markets	40	(74)
Merchandise Marks Act	4	(29)
Unsound food (condemnation visits)	112	(154)
Labelling of food	51	(70)
Complaints re. food	131	(85)

Sundry Acts

Diseases of Animals	100	(116)
Cattle Market	131	(122)
Pests	81	(85)
Clean Air	125	(64)
Noise Abatement	64	(46)
Pet Animals	4	(19)

Miscellaneous

Lectures, Talks and Exhibitions	103	(24)
Old Persons	22	(20)
Other visits	268	(284)
Flood visits	31	(703, includes water sam- pling)
Water sampling	46	

Informal Notices

	Served	Complied with
Offices, Shops and Railway Premises Act	34	29
Housing Acts	4	3
Public Health Acts	67	57
Food Hygiene	38	16
Factories Acts	5	5
Noise Abatement Act	1	—
Miscellaneous	4	1

Statutory Notices

	Served	Complied with
Public Health Act, 1936—Section 24	9	9
Section 39	2	2
Section 45	0	1
Section 79	1	1
Section 93	7	2
Public Health Act, 1961—Section 17	3	3
Section 26	2	1
Housing Act, 1961—Section 15	1	0
Section 16	1	1
Housing Act, 1964—Section 19	4	2

FACTORIES ACT, 1937-1959

Inspections for provisions as to Health made by Public Health Inspectors: —

	Number on Register	Number of Inspections	Number of Written Notices	Number of Owners Prosecuted
(1) Factories in which Sections 1, 2, 3, 4 & 6 are to be enforced by Local Authority	18	1	—	—
(2) Factories not included in (1) in which Section 7 is enforced by Local Authority	173	14	—	—
(3) Other premises in which Section 7 is enforced by Local Authority (excluding outworkers' premises)	14	6	2	—

Number of cases in which defects were found:

Sanitary Conveniences:

	Found	Remedied
(a) No intervening ventilated space	1	1
(b) Absence of sanitary accommodation	2	2
(c) Absence of artificial lighting	1	—
(d) In need of decoration	1	1
	5	4

Outwork

The following table shows the number of Outworkers employed in the Borough during the year, and the type of work done:

(1)	(2)	(3)	(4)	(5)	(6)	(7)
Nature of work	Number of outworkers in August list required by Section 133 (1)	Number of cases of default in sending lists to the Council	Number of prosecutions for failure to supply lists	Number of instances of work in unwholesome premises	Notices served	Prosecutions
Wearing apparel: Making	16	—	—	—	—	—

WATER SUPPLIES

The West Surrey Water Board is responsible for Guildford's water supply with the exception of a small area in the Park Barn district where the responsibility for distribution rests with the Woking and District Water Board.

Apart from a small supplementary supply which comes from boreholes sunk in the Lower Greensand near Albury, all water for Guildford is supplied from boreholes sunk in the chalk at Ladymead Pumping Station on the Bypass, Dapdune Pumping Station and Millmead Pumping Station.

Construction of a river water abstraction and treatment works is in progress at Shalford, and when complete the output will be used to augment the Guildford supplies.

Improved equipment for the chlorination of water from both the Dapdune and Joseph's Road Pumping Stations is being constructed.

All dwelling houses in the Borough have a piped mains water supply within the house.

The water as supplied is on the alkaline side of neutrality and is free from lead and other metals. It is not plumbo-solvent and at no time have any traces of lead been found.

During the year a total of 23 routine samples of water for chemical analysis and 57 for bacteriological examination were taken (these samples are taken by the Public Health Department and are additional to the routine samples taken by the Water Board).

				Chemical Samples.		Bacteriological Samples.	
				Satis.	Unsatis.	Satis.	Unsatis.
Drinking Water							
Shops and Offices	.....	.....	.....	3	—	5	—
Private Houses	.....	.....	.....	7	—	21	1
University	.....	.....	.....	—	—	5	—
Dapdune Pumping Station	.....	.....	.....	4	—	1	—
Millmead Pumping Station	.....	.....	.....	4	—	1	—
Ladymead Pumping Station	.....	.....	.....	4	—	—	—
Rectory Fields	.....	.....	.....	—	—	1	—
Slaughterhouse	.....	.....	.....	—	—	1	—
Shalford Park	.....	.....	.....	—	—	1	—
				22	—	36	1

There are two Public Swimming Baths in Guildford:—

- (1) Castle Street Baths, owned by the Corporation. Eleven slipper baths are available at these premises.
- (2) Guildford Lido Open-air Swimming Pool, also owned by the Corporation.

There are also three children's paddling pools, one at Stoke Park and two at Guildford Lido.

Both swimming baths and the paddling pools are supplied with mains water and, with the exception of Stoke Park paddling pool, operate on the "break point" chlorination system. The water in Stoke Park paddling pool is chlorinated at frequent intervals during the summer season.

Many schools now have swimming baths, some of a very high standard, and at the invitation of the head teachers the Department has continued to take samples and advise on treatment.

Samples are submitted for analysis and in addition spot checks are made at the pool side for chlorine content.

The new swimming pool and sports centre at Bedford Road is rapidly taking shape. It will be a relief when the new swimming baths are completed so that the obsolete Castle Street Baths may be closed.

Swimming Bath and Paddling Pool Water	Chemical Samples.		Bacteriological Samples.	
	Satis.	Unsatis.	Satis.	Unsatis.
Lido Swimming Pool	—	—	4	—
Stoke Park Paddling Pool	—	—	2	1
Castle Street Baths	1	—	2	—
Private School Swimming Baths	—	—	10	1
	1	—	18	2

DRAINAGE AND SEWERAGE

Sewage Disposal Works

The Borough Engineer reports that it is becoming increasingly difficult to maintain a satisfactory standard of effluent. The average daily flow is approximately 5,000,000 gallons. There are problems in securing the satisfactory disposal of sludge. The design is now under way for a very substantial extension to the Sewage Works which will cater for the increased flows to the works and for the biological treatment of sewage and the disposal of sludge.

Cesspools

The number of cesspools and private disposal plants in the Borough at the end of December, 1968 was 115. Cesspools are emptied by mechanical means as and when required. Use of this service appears to be increasing. The cesspools are at houses where it is impracticable to connect to a sewer because of distance or lack of fall.

Public Cleansing — Refuse Disposal

The salvage of waste paper and cardboard is continuing at an increasing rate. The price per ton for baled salvage has been in-

creased and the demand at the mills has also increased. It is expected that this demand will be maintained for quite some time.

The tip allocated for the disposal of rubbish delivered privately by local residents under the Civic Amenities Act is being increasingly well used, and the collection of large items of furniture is still increasing as householders become aware of the service available. The disposal of cars at the Depot continued throughout the year. This is a free disposal service without cost to the Council, and this service is also being increasingly used.

THE OFFICES, SHOPS AND RAILWAY PREMISES ACT, 1963

TABLE A.

Registrations and General Inspections

Class of Premises	Number of premises registered during the year	Total number of registered premises at the end of year	Number of registered premises receiving a general inspection during the year
Offices	17	333	70
Retail shops	18	411	120
Wholesale shops, warehouses	3	25	7
Catering establishments open to the public, canteens	2	74	30
Fuel Storage Depots	—	2	—
	40	845	227

TABLE B.

Number of visits of all kinds by Inspectors to registered premises 331.

TABLE C.

Analysis of persons employed in registered premises by workplace.

Class of Workplace	Number of Persons Employed
Offices	4,663
Retail shops	3,870
Wholesale departments, warehouses	306
Catering establishments, open to the public	762
Canteens	237
Fuel storage depots	20
Total	9,858
Total males	4,285
Total females	5,573

Registration and Inspection

It was again found that occupiers of premises to which the Act applies are often unaware of the necessity to submit a notification of employment of persons. Where premises to be newly registered are discovered in the course of routine inspection the employer is informed of his obligation to submit Form O.S.R.1.

Initial inspection of all premises on the register having been completed during 1967, it has been the aim to maintain general inspection at a level which will ensure a visit to each premises at an interval of approximately two years. Newly occupied premises are visited in the course of routine inspections.

Because of the progress which has been made in the district since the Act came into operation it is no longer necessary to employ a specialist Inspector to spend the majority of his time upon duties in connection with the Act. The number of Inspectors appointed under the Act was reduced by one with effect from 1st December, 1969 and in future all District Inspectors will carry out the full duties of enforcement. This will ensure the fullest possible coverage of the district and will maintain a high frequency of reinspections. Of course Inspectors will visit offices and shops under other Acts at frequent intervals and are thus well able to cover any infringements.

Operation of the general provisions of the Act

No problems were encountered in operating these provisions which are the responsibility of the Council. Contraventions are generally satisfactorily dealt with following a letter requesting attention to points at issue.

Accidents

Surprisingly few accidents were notified and it is felt that employers are still unaware of their duty in this respect. No accident was fatal and the main categories of accident were again from the use of hand tools, injuries due to handling goods and falls or tripping over objects.

FOOD AND DRUGS ACT, 1955

Food Sampling

The routine sampling of food for examination by the Public Analyst continued and although fewer samples were taken because of staffing difficulties, a wide range of foods was examined. In a number of instances informal action was taken to rectify labelling faults. During the year a great deal of new legislation about labelling and food standards was published. The operation of some of this legislation is postponed to enable manufacturers to comply with new labelling requirements and with new requirements relat-

ing to ingredients. Permission for the use of cyclamates as an artificial sweetener in soft drinks and other foods was withdrawn during the year following a public outcry, although it is doubtful whether this particular chemical is more dangerous than many of the chemicals present in our foodstuffs today. A glance at the labels on the tins and bottles in any supermarket reveals an alarming range of chemicals used to enhance flavour, improve colour, emulsify, coagulate, stabilise or vary the true nature of the food, supposedly to make it more palatable and attractive to the consumer. The excuse for the use of many of these chemicals is that when food is nationally marketed as so much is today, it could not be manufactured and distributed in a standardised form unless it were produced to a strict chemical formula. Surely the time has come for a fresh examination of the numbers and types of additives which go into our food. Many of these may truly be quite harmless but they should be proven harmless and they should have some proved dietetic use before their indiscriminate use is permitted.

The table indicates the number and type of samples taken: —

Articles	Analysed			Adulterated or Irregular		
	Formal	Informal	Total	Formal	Informal	Total
Food:						
Cereal and Cereal Products						
Cornflour		1	1			
Flour, self-raising		1	1			
Flour, wholemeal		1	1			
Porridge, quick		1	1			
Fruit and Fruit Products						
Blackcurrant Health Drink		1	1			
Cherries in Syrup		1	1			
Currants		1	1			
Diajel		1	1			
Grapefruit		1	1			
Jam, mixed fruit		1	1			
Jam, strawberry		1	1			
Jelly, raspberry flavour		1	1			
Marmalade, Honey		1	1			
Raisins, seedless		1	1			
Raspberry with Kirsch		1	1			
Skels		1	1			
Squash, Lemon		1	1			
Squash, Sun Quick		1	1			
Sultanas		1	1			
Vinegar, Cider		1	1			
Meat Products						
Bovril		1	1			
Chicken in Jelly		1	1			
Crabmeat		1	1			
Meat Tenderiser		1	1			
Meat paste, chicken		1	1			
Pasties, cornish		1	1			
Pie, minced beef		1	1			
Pie, pork		2	2			
Pie, steak and kidney		1	1			
Pudding, meat		1	1			
Rolls, sausage		4	4			
Soup, cream of chicken		1	1			
Tongue, sheep		1	1			
Milk	6	1	7			
Milk Products						
Butter		1	1			
Cheese, cottage		1	1			

Article	Analysed			Adulterated or Irregular		
	Formal	Informal	Total	Formal	Informal	Total
Cheese, Danish blue ...		1	1			
Cheese, Danish mini fymbo ...		1	1		1*	1
Cheese, full fat soft ...		1	1			
Cheese, processed ...		1	1			
Cheese, Wensleydale ...		1	1			
Coffeemate ...		1	1			
Cream, Danish ...		2	2			
Cream, dairy ...		1	1			
Cream, dessert, fresh mandarin ...		1	1			
Cream dessert, fresh ...		1	1			
Cream, double ...		3	3			
Cream, single ...		1	1			
Cream, Sunny Farm ...		1	1			
Yoghurt, natural ...		1	1			
Vegetable and Vegetable Products						
Chutney, tomato ...		1	1			
Chutney, tomato/chilli ...		1	1			
Curry powder ...		1	1			
Essence, coffee and chicory ...		3	3			
Fat, Kosher cooking ...		1	1			
Gherkins, pickled ...		1	1			
Ketchup, hot tomato ...		1	1			
Lard ...		1	1			
Maple Syrup ...		1	1			
Margarine ...		1	1			
Margarine, Kosher ...		1	1			
Oil, cooking ...		1	1			
Seasoning, Aromat ...		1	1			
Shortening, Vegetable oil ...		1	1			
Miscellaneous						
Bengers ...		1	1			
Cake, covering ...		1	1			
Chocolate, cherry ...		1	1			
Chocolate, rum marzipan ...		1	1		1*	1
Chocolate, wafer ...		1	1			
Dressing, fish ...		1	1			
Dressing, thousand island ...		1	1			
Eggs, soft sugar ...		1	1			
Gelatine ...		1	1			
Gravy Improver ...		1	1			
Gravy Salt ...		1	1			
Honey, pure English ...		1	1			
Honey, pure Mexican ...		1	1			
Icing, marzipan almond ...		1	1			
Meringues ...		1	1			
Nutella ...		1	1			
Ruthmol ...		1	1			
Spread, Honey Bear ...		1	1			
Sugar, Caster ...		1	1			
Sweet 'n Easy ...		1	1			
Sweet 'n Low ...		1	1			
Vodka ...	1		1			
Whisky ...	2		2			
Totals	9	94	103	—	2*	2

• mislabelled

Legal Proceedings

There were 68 complaints about the sale of unsatisfactory food in the year. This must be an all-time record, which says little for the care with which our food is handled — even allowing for the vast turnover in a shopping centre the size of Guildford. There were 21 complaints about the sale of mouldy food, 23 about extra-

neous matter in food and 24 other complaints. The extraneous matter was extremely varied, ranging from a fingernail in chopped pork to three complaints at various times about larvae in fruit yoghurt. There were also several instances of insects cooked in food. Many of these complaints, particularly those about mould, could be attributed directly to carelessness. Failure of shop Managers to code and rotate stock, failure of manufacturers to code clearly and correctly, failure of sales staff to check food on retail sale.

It is astonishing that only four prosecutions were taken during the year and perhaps even more astonishing that the Guildford Magistrates seem to regard these cases as of little importance. A glance at the table beneath shows the fines that have been imposed in Guildford. A glance at the December, 1969 law reports shows that at Yeovil Magistrates Court a firm was fined £50 for selling mouldy bread, at Barking a firm was fined £50 for selling a mouldy apple turnover, and at the same court on the same day another firm was fined £50 for selling a mouldy Cornish Pasty. These are not isolated incidents. In addition in each case costs were awarded to the prosecution, presumably on the fair assumption that the rate payers should not have to bear the cost of prosecutions attributable to somebody else's carelessness.

More cases could be brought to Court if members of the public were not so reluctant to appear as witnesses. It is not at present the policy of the Council to subpoena unwilling witnesses, and most people are satisfied, having complained to the Health Department, that they have done all that is necessary and do not want the inconvenience and publicity attendant on a Court hearing. In quite a high proportion of complaints it is found that the evidence is inconclusive and that a fair case could not be presented to the Magistrates. When one realises that probably the 68 complaints received represent only a fraction of the total offences, the seriousness of the situation is immediately evident.

Like the Council, both the public and the Courts have a clear duty to ensure that where there is a case to answer it must be viewed with the seriousness which it deserves.

Act	Offence	Result of Prosecution
Milk and Dairies (General) Regulations, 1959	Sale of Dirty Milk bottle	Fined £10-0-0
Food and Drugs Act, 1955	Sale of Mouldy coffee fingers	Fined £10-0-0
Food and Drugs Act, 1955	Sale of mouldy and dirty sweets	Fined £10-0-0 + £5-0-0-costs
Food and Drugs Act, 1955	Sale of mouldy beef pie	Fined £15-0-0 + £5-0-0 costs

Milk Supply

Milk and Dairies (General) Regulations, 1959

	Premises on Register at 31st Dec., 1969
MILK PRODUCERS WITHIN THE BOROUGH	
Number of Cowkeepers registered with the Ministry of Agriculture, Fisheries & Food	2
Number of local producers holding "Untreated" Licences	Nil
Number of Producers-Wholesalers	2

Milk (Special Designation) Regulations, 1960

The following is a summary of Designated Milk Licences granted within the Borough:—

	Premises on Register at 31st Dec., 1969
DEALER'S LICENCES:	
Untreated (farm bottled)	1
DEALER'S (PASTEURISER'S) LICENCES:	
Pasteurised	2
DEALER'S (PRE-PACKED) MILK LICENCES:	
Untreated/Pasteurised/Sterilised/Ultra Heat Treated	31

Milk Vending Machines

There is one automatic vending machine in the Borough and the conditions of storage and distribution are satisfactory.

Bacteriological Examination of Milk—Analysis of Results—1969

For many years it has been almost unknown for milk pasteurised in Guildford to fail to satisfy the prescribed tests. The dairies where the milk is pasteurised are inspected and the equipment and temperature recording apparatus are open to inspection at all times. It therefore seems safe and wise in the interests of economy to reduce the number of samples taken. This is particularly true in the case of Dairies such as the two in Guildford which serve a comparatively wide area covering a number of local authorities. Not only is the milk sampled in Guildford, but it is sampled by my colleagues in all the adjoining districts. Their action is justified because the milk may be older by the time it reaches the doorsteps of residents in their areas. The number of samples submitted this year has been reduced and the results are given in the table. Once again the only failure was of raw milk. Heat treated milk continues to be our safest and most wholesome food; raw milk must continue to be highly suspect because of the risk of infection from *Brucella Abortus* (causing Undulant Fever) and 'Q' Fever. Only one local dairy now sells raw milk, and I understand that the demand continues to decrease steadily.

Bacteriological Examination of Other Foods

	No. of samples taken	Satis- factory	Unsatis- factory	Remarks
Cream	86	55	30	Decolourised methylene blue:
				0 hours — 11
				$\frac{1}{2}$ hour — 4
				1 hour — 1
				$1\frac{1}{2}$ hours — 4
				2 hours — 6
				$2\frac{1}{2}$ hours — 3
				3 hours — 3
				$3\frac{1}{2}$ hours — 1
				4 hours — 5
				$4\frac{1}{2}$ hours — 47

Bacteriological Examination of Milk—Analysis of Results—1969

Type of Milk	Methylene Blue R.T.				Phosphate Test			Biological Test		Turbidity Test		B.R. Test		Remarks
	Total number of samples submitted	Number of samples submitted	Passed	Tests Void	Failed	Percentage Passed	Number of samples submitted	Number passed	Number failed	Percentage passed	Number of samples submitted	Percentage passed	Number of samples submitted	Percentage passed
Pasteurised ...	20	20	20	—	—	100	20	20	—	100	—	—	—	—
Pasteurised Channel Island ...	7	7	7	—	—	100	7	7	—	100	—	—	—	—
Untreated Channel Island ...	4	4	4	—	—	100	—	—	—	—	—	—	2	100
Untreated ...	18	18	17	—	1	94	—	—	—	—	—	—	6	100
Pasteurised Homogenised ...	1	1	1	—	—	100	1	1	—	100	—	—	—	—
Ultra Heat Treated ...	1	—	—	—	—	—	—	—	—	—	—	—	—	Colony Count Unsatisfactory
	51	50	49	—	1	98.5	28	28	—	100	—	—	8	100

Cream

During the year the Department continued to assist the Public Health Laboratory Service in its survey of cream retailing, and a large number of cream samples were submitted for examination. The results of the majority of these were highly unsatisfactory. Whilst one should not anticipate the results of the survey which will be completed and upon which a report will be published in due course, it seems fairly clear that many of the samples failed to satisfy the tests because of unwarranted delay between production and retail sale. Those shops which operated an efficient stocking system sold cream which usually satisfied the tests.

The Liquid Egg (Pasteurisation) Regulations

There are no egg pasteurisation plants in the district and no liquid egg samples were taken.

Manufacture and Sale of Ice-Cream

There is one registered manufacturer of ice-cream in the Borough who manufactures on a small scale, and 141 distributors registered, including 7 new registrations during the year.

Satisfactory provisions have been made in accordance with the Ice-Cream (Heat Treatment) Regulations, 1947 and 1952, and any contraventions found have been remedied.

During the year 37 inspections were made of ice-cream premises and 19 samples taken for bacteriological examination.

Many mobile ice-cream sales vehicles are clean and highly satisfactory but, as in most other trades, there are a number of salesmen who enter the trade for a short period and whose only objective is a quick profit on one season's work and then an escape to other activities. These types know little about hygiene and care even less. For staffing reasons it was difficult during the year to keep these adventurers well under control, and the low number of samples taken does not indicate that this work is any less important than in previous years.

Methylene Blue Tests:

Ice-cream, ordinary (number submitted 10):

	Grade 1 (4½ hrs. +)	Grade 2 (2½—4 hrs.)	Grade 3	Grade 4
Totals	9	—	1	—
% passed	90	—	0	—

Soft ice-cream (number of samples submitted 9):

	Grade 1	Grade 2	Grade 3	Grade 4
Totals	6	1	2	—
% passed	66.6	11.1	0	0

Grades 1 and 2 are satisfactory, 3 and 4 unsatisfactory.

INSPECTION AND SUPERVISION OF FOOD PREMISES

From the complaints received within the Department it is clear that the standard of hygiene demanded by the public is still not attained by a large number of food traders. In many aspects of food trading public demand outstrips the standard set by both food traders and legislation — particularly with regard to the retail display and sale of open food for consumption without further preparation. For example, it is quite common to receive complaints about the way cakes are displayed for sale in shops, both in open windows and on top of display units. Iced cakes, cream cakes and bread are often within the reach of small children and often customers lean over them when choosing their own selection and their clothing touches them. They are apt to cough and sneeze over them too.

More and more progressive traders are using refrigerated display units for dairy cream products, for cooked meats, pies, and other prepared meat products. The adequate protection of this type of product which is proved to be a major carrier of disease organisms by preparation, transportation and retail display under controlled refrigerated conditions is long overdue. It would do much to decrease the still appalling number of food poisoning cases.

There is another curious anomaly about the food trade; there is no obligation placed on a trader, whatever the nature of the food he deals in to inform the Public Health Department of his intention to establish a business and to obtain prior approval. This means that what was yesterday a dress shop can be tomorrow a food shop, often with inadequate facilities, and unsatisfactory conditions can persist until the new occupier is either persuaded to improve, close down or faces prosecution. Surely a more sensible way would be to require that the advice and help of public health inspectors is sought at the earliest point of conception so that when the business is finally established it is established in full compliance with the law and to meet the high standards now demanded by traders of integrity and the public.

In many respects we may complain of having too much law, but certainly regulations to provide (1) the temperature control of susceptible foods at all stages and (2) the prior approval of food premises, are now essential if further progress is to be made.

If any example is needed to underline the value of such regulations it is necessary only to quote milk and ice-cream, notable exceptions to the rule. These two valuable foods are today almost beyond reproach so far as hygienic handling is concerned. Temperature control, prior approval and registration of the dairies and manufacturing premises of this particular food is alone responsible for this state of affairs.

Let me hasten to add at this point that food traders in

Guildford have during the year, in spite of a falling off in the number of inspections it has been possible to make, continued in general to make every effort to maintain and indeed improve the high standards we in this Department have always expected of them. But there are, and always will be, a minority who slide by and pay little more than lip service to good hygiene, and having seen the Inspector leave by the back door breathe a sigh of relief hoping not to see him again for an appreciable time. Our lectures and educational efforts, which have been increased during 1969, are aimed particularly at this section of the trade, and acting on the principle that constant dripping wears away even stone, I am convinced that we shall eventually be proud in Guildford of all our traders!

The following table gives statistical information on the type of premises and number of visits made.

PARTICULARS OF FOOD PREMISES IN THE BOROUGH

	No. of Premises	No. of Inspec- tions	No. fitted to comply with Reg. 16	No. to which Reg. 19 applies	No. fitted to comply with Reg. 19	Number Registered	
						Section 16 Food and Drugs Act, 1955	Milk and Dairies Regulations 1959
Ice-cream premises	141	37	141	A new recording system is being brought into use which will bring information under these headings up to date.	141	141	—
Dairies, milk shops	30	47	30		—	—	30
Catering establishments including factory and school canteens)	121	274	121		—	—	—
Licensed premises (including club premises)	111	66	111		—	—	—
Bakers and confectioners	62	54	62		—	—	—
Butchers and cooked meat manufacturers	22	81	22		22	22	—
Grocers and General Stores	84	184	84		—	—	—
Fish Shops—wet and fried	13	29	13		—	—	—
Greengrocers	21	50*	21		—	—	—
Slaughterhouse	1	60**	1		—	—	—
Mobile shops	Not known	24	—		—	—	—
	606	906	606		163	163	30

*Regular weekly visits are also paid to the open market in North Street.

**Additional to attendances by Resident Meat Inspector.

CLINICS AND TREATMENT CENTRES

The Surrey County Council Clinics are as follows: —

Bury Fields, Guildford

Cervical Cytology: Thursdays a.m. (By appointment only).

Contraceptive Clinic: Thursdays p.m. and 1st and 3rd Mondays p.m. (By appointment only).

Child Guidance (By appointment only).

Child Health: Wednesdays and Fridays p.m.

Dental (By appointment only).

Diphtheria Immunisation: School Children at School Medical Clinics;
Pre-school Children at Child Health Clinics.

Eye: Thursdays a.m. and p.m., 1st Fridays a.m. and p.m. and 3rd Fridays p.m. (By appointment only).

School Medical: Mondays a.m. (except during School Summer Holidays).

Speech: Orthopaedic; Audiology; Remedial Exercises and Mothercraft (By appointment only).

North Road, Stoughton

Cervical Cytology: Wednesday a.m. (By appointment only).

Child Health: Tuesday p.m.

Dental (By appointment only).

Diphtheria Immunisation: School Children at School Medical Clinics;
Pre-school Children at Child Health Clinics.

Mothercraft and Remedial Exercises (By appointment only).

School Medical: 1st, 3rd and 5th Fridays a.m. (except during School Summer Holidays).

St. Peter's Hall, Almond Close, Stoke Hill, Guildford

Child Health: Thursdays p.m.

Church Hall, Burpham

Child Health: Wednesdays p.m. (Doctor 2nd and 4th only).

Village Hall, Onslow Village

Child Health: 1st and 3rd Wednesday p.m.

Merrow Village Hall

Child Health: Mondays p.m.

St. Clare's Church Hall, Westborough

Child Health: Mondays p.m.

The South West Metropolitan Regional Hospital Board Clinics are as follows: —

Chest Clinic, 64 Epsom Road, Guildford

Mondays and Wednesdays: 1 to 4 p.m.; Fridays 9 a.m. to 12 noon.

Thursdays: 9.30 to 12 noon (By appointment only).

Venereal Diseases Clinic, Royal Surrey County Hospital, Guildford

Females: Mondays: 3 to 4.30 p.m. Fridays: 3 to 4.30 p.m.

Males: Mondays: 5 to 6.30 p.m. Fridays: 5 to 6.30 p.m.

